

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 8:00 am
Secretary of State

04-21-2005 90254 023 ***150.00

DOCUMENT # P01000003830	
1. Entity Name ESTER & FRANK BOSH INC.	



Principal Place of Business 4506 45TH STREET VERO BEACH, FL 32967 US	Mailing Address 4506 45TH STREET VERO BEACH, FL 32967 US
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50041778

2. Principal Place of Business 4506 45th Street	3. Mailing Address P.O. Box 690002
Suite, Apt. #, etc. VERO BEACH	Suite, Apt. #, etc. VERO BEACH
City & State Florida	City & State Florida
Zip 32967	Country Indian River



03312005 Chg-P CR2E034 (10/03)

4. FEI Number 59-3692048	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BOSH, ESTER C 550 38TH AVE. VERO BEACH, FL 32968	7. Name and Address of New Registered Agent Name BOSH, ESTER C Street Address (P.O. Box Number is Not Acceptable) 500 36TH AVENUE City VERO BEACH FL Zip Code 32968
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOSH, ESTER 4506 45TH STREET VERO BEACH, FL 32967 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BOSH, FRANK 4506 45TH STREET VERO BEACH, FL 32967 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ESTER BOSH **ESTER BOSH (President)** 04-18-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #